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UNITED STATES

SECURITIES AND EXCHANGE COMMISSION ALCHIVED Washington, D.C. 20549

FORM D

OTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. 160

OMB APPROVAL OMB Number: 3235-0076 Expires:

Estimated average burden hours per response.....16.00

SEC USE	ONLY
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SECTION 4(6), AND/OR ·6|UNIFORM LIMITED OFFERING EXEMPTION Name of Offering (check if this is an amendment and name has changed, and indicate change.) LaGarde Series B Preferred Stock Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Filing Under (Check box(es) that apply): Type of Filing: A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer (check if this is an amendment and name has changed, and indicate change.) Name of Issuer LaGarde, Incorporated (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Address of Executive Offices (913) 489-0800 25055 West Valley Parkway, Olathe, KS 66061 (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Address of Principal Business Operations (if different from Executive Offices) **Brief Description of Business** E-Commerce Software Company Type of Business Organization limited partnership, already formed other (please specify): Ø corporation business trust limited partnership, to be formed Month Year

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization: [11]

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

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CN for Canada; FN for other foreign jurisdiction)

Actual Estimated

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When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Faiture to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Promoter ✓ Director Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) LaGarde, Robert Business or Residence Address (Number and Street, City, State, Zip Code) 25055 West Valley Parkway, Olathe, KS 66061 Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) LaGarde, Laura Business or Residence Address (Number and Street, City, State, Zip Code) 25055 West Valley Parkway, Olathe, KS 66061 Check Box(es) that Apply: Promoter | Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Whelan, Joseph Business or Residence Address (Number and Street, City, State, Zip Code) 25055 West Valley Parkway, Olathe, KS 66061 ☐ Beneficial Owner ☐ Executive Officer General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Pressman, Jason Business or Residence Address (Number and Street, City, State, Zip Code) 2440 Sand Hill Road, Suite 300, Menlo Park, CA 94025 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Shasta Ventures, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 2440 Sand Hill Road, Suite 300, Menlo Park, CA 94025 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Director Promoter Beneficial Owner Check Box(es) that Apply: Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Г		***			B, IN	FORMATI	ON ABOUT	r offerin	1G				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No ₩			
Answer also in Appendix, Column 2, if filing under ULOE.											c		
2. What is the minimum investment that will be accepted from any individual?										SYes	No		
3.	 Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any 										⊠		
4,	commis If a pers or states	sion or simi on to be lis i, list the na	ion requested lar remuner ted is an ass me of the be you may se	ration for se ociated per roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok re than five	rs in conne er or deale: : (5) person	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in th EC and/or	ne offering. with a state		
Fu N	-	Last name	first, if indi	vidual)									
		Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
Na	me of As	sociated Br	oker or Dea	aler									
Sta	-		Listed Has								···		
	(Check	"All States	or check	individual	States)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		**************			☐ A1	l States
	AL IL MT RI	AK IN NE SC	AZ TA NV SD	AR KS NH TN	CA KY NI TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Fu	Il Name (Last name	first, if indi	vidual)									
Bu	isiness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Na	ime of As	sociated B	oker or De	aler								·····	
St			Listed Has								<u>_</u>		
	(Check	"All State:	s" or check	individual	States)	***************************************	***************************************	•••••		***************		∏ AI	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Fu	II Name (Last name	first, if ind	ividual)							-		
Bt	isiness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)						
N	ame of As	sociated B	roker or De	aler									
St	ates in Wi	hich Person	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)							☐ AI	1 States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggregate Offering Pri		Amount Already Sold	
	Debt	s		s	
	Equity	s		\$	
	Common Preferred			775,000.00	
	Convertible Securities (including warrants)	\$	Ю	\$	
	Partnership Interests	s		\$	
	Other (Specify)	s		\$	
	Total	\$_775,000.0	0	\$_775,000.00	
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate Dollar Amount of Purchases	
	Accredited Investors		_	\$_775,000.00	
	Non-accredited Investors			\$	
	Total (for filings under Rule 504 only)		_	\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
	Type of Offering	Type of Security		Dollar Amount Sold	
	Rulc 505		_ <u>-</u> -	s	
	Regulation A		_	s	
	Rule 504		_	s	
	Total	 -	_	s_0.00	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			s	
	Printing and Engraving Costs			s	
	Legal Fees	*************	Z	\$_100,000.00	
	Accounting Fees			\$	
	Engineering Fees	***********		<u> </u>	
	Sales Commissions (specify finders' fees separately)			s	
	Other Expenses (identify) Common Stock Valuation		Ø	\$_9,000.00	
	Total		7	\$ 109,000.00	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF THE		
b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$
each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross		
	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees		. 🗆 s
Purchase of real estate		. 🗆 s
Purchase rental or leasing and installation of machinery		
Construction or leasing of plant buildings and facilities		. 🗆 s
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		
Repayment of indebtedness	\$	s
Working capital	□\$	☑ \$ 666,000.00
Other (specify):	\$	_ [] \$
	s	. 🗆 \$
Column Totals	\$ 0.00	Z \$ 666,000.00
Total Payments Listed (column totals added)	∑ \$ <u>6</u>	66,000.00
D. FEDERAL SIGNATURE		
nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis	ssion, upon writt	ule 505, the following en request of its staff
nuer (Print or Type) Signature	Date	
	October 08,200	7
me of Signer (Print or Type) Title of Signer (Print or Type) President and Chief Executive Officer		
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. Salaries and fees Purchase, rental or leasing and installation of machinery and equipment Construction or leasing of plant buildings and facilities Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness Working capital Other (specify): Column Totals Total Payments Listed (column totals added) D. FEDERAL SIGNATURE e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant typoragraph (b)(2) of other (Print or Type) Garde, Incorporated Title of Signer (Print or Type)	and total expenses farmished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. Payments to Officers, Directors, & Affiliates Salaries and fees — \$ Purchase of real estate — \$ Purchase, rental or leasing and installation of machinery and equipment — \$ Construction or leasing of plant buildings and facilities — \$ Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) — \$ Repayment of indebtedness — \$ Working capital — \$ Other (specify): — \$ Column Totals — \$ D. FEDERAL SIGNATURE e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Repart to the signed by the issuer to furnish to the U.S. Securities and Exchange Commission, upon write information furnished by the issuer to any non-accredited investor pursuant tap paragraph (b)(2) of Rule 502. Total Payments (Print or Type)

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE S	GNATURE			
۱.	Is any party described in 17 CFR 230.262 presentl provisions of such rule?	cation	Yes	No E		
	See Appe	ndix, Column	5, for state respon	sc.		
2.	The undersigned issuer hereby undertakes to furnish D (17 CFR 239.500) at such times as required by s		dministrator of any	state in which this notice is f	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnities issuer to offerees.	sh to the state	: administrators, up	on written request, informat	tion furr	nished by the
4.	The undersigned issuer represents that the issuer is limited Offering Exemption (ULOE) of the state in of this exemption has the burden of establishing the	which this no	ice is filed and un	derstands that the issuer clai	titled to ming th	the Uniform e availability
The issu	suer has read this notification and knows the contents to	be true and h	as duly caused this r	otice to be signed on its beha	lf by the	undersigned
duly au	uthorized person.	۸۸	10			
Issuer ((Print or Type) Sig	fine //	עגוו	Date		
LaGard	de, Incorporated	AIM	1 Moc	October 08,200	7	
Name ((Print or Type)	c (Print or Ty	/pc)			
Joseph	oh Whelan (Pre	sident and C	hief Executive Off	icer		

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 ı Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell explanation of Type of investor and offering price to non-accredited amount purchased in State waiver granted) offered in state investors in State (Part E-Item 1) (Part C-Item 2) (Part C-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited Investors Amount Yes No Investors No Amount State Yes AL ΑK ΑZ AR × Convertible \$750,000.00 CA × **Professed Stack** co CT DE DC FL GA HI ID IL IN IA Convertible × \$25,000.00 KS X KY LA ME MD MA MI MN MS

APPENDIX 4 1 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell Type of investor and explanation of offering price to non-accredited amount purchased in State (Part C-Item 2) waiver granted) investors in State offered in state (Part B-Item 1) (Part E-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Yes No Investors **Investors** Amount Yes No State Amount MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VŢ VΑ WA wv WI

				APP	ENDIX				
1	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of amount pu		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State		No	(at a tom s)	Number of Accredited Investors	Accredited Non-Accredited		Yes	No	
PR									

